

Printed 02/11/2004

APPLICATION NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCK
09/628,396	08/01/2000	049	3634	60,130-6

APPLICANT
CHRISTOS KYRTSOS, SOUTHFIELD, MI.

CONTINUING DOMESTIC DATA**
VERIFIED

371 (NAT'L STAGE) DATA**
VERIFIED

FOREIGN APPLICATIONS**
VERIFIED

FOREIGN FILING LICENSE GRANTED 09/18/2000

Foreign priority claimed 35 USC 119 (a-d) conditions met	O yes O no O yes O no O Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPI CLA
Verified and acknowledged	Examiner's Name Initials	MI	1	17	3

ADDRESS
CARLSON, GASKEY & OLDS, P.C.
400 WEST MAPLE ROAD
SUITE 350
BIRMINGHAM , MI 48009

TITLE
OBJECT DETECTION BY SIGNAL FIELD MAPPING



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COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5651

SERIAL NUMBER 09/628,396	FILING DATE 08/01/2000 RULE	CLASS 049	GROUP ART UNIT 3634	ATTORNEY DOCKET NO. 60,130-620	
APPLICANTS Christos Kyrtos, Southfield, MI;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/18/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY MI	SHEETS DRAWING 1	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
ADDRESS 26096 CARLSON, GASKEY & OLDS, P.C. 400 WEST MAPLE ROAD SUITE 350 BIRMINGHAM , MI 48009					
TITLE Object detection by signal field mapping					
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____		



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BIBDATASHEET

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 09/18/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MI	SHEETS DRAWING 1	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
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		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____



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APPLICANTS Christos Kyrtos, Southfield, MI; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/18/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY MI	SHEETS DRAWING 1	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
ADDRESS 26096 CARLSON, GASKEY & OLDS, P.C. 400 WEST MAPLE ROAD SUITE 350 BIRMINGHAM, MI 48009					
TITLE Object detection by signal field mapping					
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APPLICANTS

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** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/18/2000

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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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SERIAL NUMBER 09/628,396	FILING DATE 08/01/2000 RULE -	CLASS 340	GROUP ART UNIT 2736	ATTORNEY DOCKET NO. 60,130-620	
APPLICANTS Christos Kyrtos, Southfield, MI ; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/18/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY MI	SHEETS DRAWING 1	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
ADDRESS Theodore W Olds Esq Howard & Howard Attorneys PC Suite 101 39400 Woodward Avenue Bloomfield Hills ,MI 48304-5151					
TITLE Object detection by signal field mapping					
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		